PET	TITION FOR EXTENSION OF TIME UNDER 37 CFR 1.	1.136(a) Docket Number (Optional)	
	FY 2009	026322-002910US	
<u> </u>	(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 481	818).)	
Appl	ication Number 10/661,400	Filed September 12, 2003	
For	DEVICES AND METHODS FOR IMPROVING VISION		
Art U	Init 3774	Examiner Paul B. Prebilic	
	is a request under the provisions of 37 CFR 1.136(a) to exterior.	end the period for filing a reply in the above identified	
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
ĺ		ee Small Entity Fee	
	One month (37 CFR 1.17(a)(1)) \$13	30 \$65 \$	
	Two months (37 CFR 1.17(a)(2)) \$49	90 \$245 \$	
	Three months (37 CFR 1.17(a)(3)) \$111	110 \$555 \$ <u>555</u>	
	Four months (37 CFR 1.17(a)(4)) \$173	730 \$865 \$	
	Five months (37 CFR 1.17(a)(5)) \$235	350 \$1175 \$	
\boxtimes	Applicant claims small entity status. See 37 CFR 1.27.		
	A check in the amount of the fee is enclosed.		
	Payment by credit card. Form PTO-2038 is attached.		
\boxtimes	The Director has already been authorized to charge fees in this application to a Deposit Account.		
\boxtimes	The Director is hereby authorized to charge any fees which Deposit Account Number 20-1430	ch may be required, or credit any overpayment, to	
	WARNING: Information on this form may become public. Credit or Provide credit card information and authorization on PTO-2038.	card information should not be included on this form.	
I am the applicant/inventor.			
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).			
attorney or agent of record. Registration Number 44,335			
attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34			
	//John K. Shimmick//	07/27/2010	
	Signature	Date	
	John K. Shimmick, Reg. No. 44,335	650-326-2400	
	Typed or printed name	Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
\square	Total of 1 forms are submitted.		